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Alexandria, VA 22313-1450****FROM:****Ralph D'Alessandro
Reg. No. 28,838
Attorney for Applicants****PHONE:****FAX:****(703) 872-9310****PHONE:****661-295-5600 x2404****FAX:****661-257-4953****Documents Transmitted:****Amendment Transmittal; Second Preliminary
Amendment.****Applicant(s):****Kenneth J. Newell, Stephen A. Ruatta, John S.
Stockwell****Appl. No.:****10/815,510****Filed:****April 1, 2004****Group Art Unit:****1732****Examiner:****To be determined****3D Systems Docket No.:****USA.286-2**

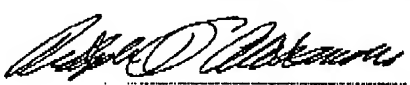
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AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. USA.286-2	
Applicant(s): Kenneth J. Newell, Stephen A. Ruatta, John S. Stockwell						
Application No. 10/815,510	Filing Date April 1, 2004	Examiner To be determined	Customer No. 22514	Group Art Unit 1732	Confirmation No. 9370	
Invention: POST PROCESSING THREE-DIMENSIONAL OBJECTS FORMED BY SELECTIVE DEPOSITION MODELING						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	14 -	20 =	0 x	\$9.00	\$0.00	
INDEP. CLAIMS	3 -	4 =	0 x	\$43.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-0900 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.						
 Signature			Dated: June 22, 2004			
Ralph D'Alessandro, Reg. No. 28,838 Attorney for Applicant 3D Systems, Inc. 26081 Avenue Hall Valencia, CA 91355			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450. _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
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